

IL HIE Medicaid Work Group

Meeting Notes

March 18, 2013

Attendees (by phone):

Dave Barnes	Department of Healthcare and Family Services (HFS)
Julie Bonello	Access Community Health Network
Pat Borrowdale	Pediatric Health Associates
Kelly Carter	Illinois Primary Health Care Association
Alena Galitskaya	Advocate Physician Partners
Andrew Garrett	Department of Healthcare and Family Services
Julie Glen	Loyola University
Roger Holloway	Illinois Health Information Technology Regional Extension Center
Peter Ingram	Sinai Health System
Wyona Johnson	Department of Healthcare and Family Services
Patrick Kaffmann	Lurie Children's Hospital
Elizabeth McKnight	Chicago Health Information Technology Regional Extension Center (CHITREC)
Cathy Potter	Southern Illinois University Health Care
Raul Recarey	Office of Health Information Technology / Illinois Health Information Exchange Authority
Mary Ring	Illinois Critical Access Hospital Network
Amanda Schmitz	University of Chicago Medicine
Direndia Shackelford	Advocate Physician Partners
JoAnn Spoor	Illinois Hospital Association
Jeff Todd	Department of Healthcare and Family Services
Eric Watson	Department of Healthcare and Family Services

1) Review of Minutes (2/19 & 3/4/13)

The minutes for February 19th and March 4th were approved.

2) EHR/PIP Status Update

- *Payments to date (3/14/13)*

2,865 EPs - \$60,165,867 (2,145 from 2011, 720 from 2012, all Year 1 Payments)

128 EHs - \$161,014,668 (92 from 2011; 2012-36 Year 1 Payments, 43 Year 2 Payments)

Total - \$221,180,535

Dave Barnes reviewed the number of payments to date noting 86 eligible providers were paid but no hospitals had been paid since the last work group call. This is due to converting the application and a few issues that arose with it.

Wyona Johnson explained that another factor that fewer providers have been paid since the last call is that the state budget appropriation for the program is low. HFS has requested supplemental funding from the Illinois General Assembly. Although the program is 100% federally funded, it is a requirement that HFS work with the General Assembly to have more funds appropriated.

3) Pre-payment Audit Process

- *Attestations in work queue (3/14/13):*
EPs – 493 (5 from 2011, 488 from 2012, all Year 1 Payments)
EHs – 43 (all 2012, 20 Year 1 Payments, 23 Year 2 Payments)

Dave Barnes indicated that five attestations from 2011 are left but the issues with those have been resolved leaving no attestations from 2011 to be reviewed.

HFS received over 200 2012 Adopt, Implement, Upgrade (AIU) attestations in a three day period last week and there were 488 in the work queue as of March 14th. Within the new system, 118 Meaningful Use attestations have been completed, another 73 are in progress of completion, 250 AIU attestations have been completed and an additional 54 are in progress of completion.

4) Stage 1 Eligible Provider Attestation Application Update

- **Attestation Process Q & A Session**

Alena Galitskaya said that she has had multiple issues with the attestation application and has been receiving error messages. She called the toll free number and was told that the system was down. **Andrew Garrett** indicated that the problem was resolved and will work with Alena on solving the issues she's had. **Alena** and **Peter Ingram** suggested that information on known system issues be sent to this group and also posted to the HFS website. The message should indicate that for providers encountering errors, they should email the [EHR mailing address](#) at HFS so that responses can be sent out individually. Alena also inquired if the deadline for attesting will be extended past March 31st.

Wyona Johnson indicated that federal approval is needed to extend the March 31st deadline. A call is scheduled with federal officials to discuss an extension. An email will be sent to providers and this work group if the extension is granted.

Julie Glen sent a list of issues she's having to Peter Ingram for discussion on today's call. Julie said that it is taking an average of 45 minutes to attest for one provider versus about 15-20 minutes when they attested with federal Centers for Medicaid and Medicare Services for Medicare. Some of those issues were:

Critical Issues (preventing us from completing our attestations):

- Alternate core question NQF -0041 not working (works depending on screen resolution but layout is distorted and hides fields. You have to assume the information you are entering is correct).
- Denominator cannot be less than the exclusions.

HFS staff said that a resolution is in development for these two issues.

- Delay in transfer for registering provider from Medicare to Medicaid

This issue was resolved by HFS staff.

Non-Critical Technical Issues (not stopping us from attesting but still glitches in the website):

- Message error for pediatrician patient volume (says that it has to be above 30% CAID)
- Patient electronic access URL field does not allow enough characters

A fix for these issues is in development at HFS.

- Sign-in loop

HFS sent an email to providers saying to change their password to resolve this.

5) Outreach to EPs

Jeff Todd said that the outreach contracts have been finalized and he has been given approval to share the HFS database with the Regional Extension Centers for outreach purposes.

Meeting adjourned. The next call is scheduled on April 1st.